



**Manchester
Metropolitan
University**

Ekpenyong, Mandu Stephen, Nyashanu, M, Ekpenyong, Alfred S, Odejimi, Opeyemi, Bosun-Arije, Foluke S and Serrant, Laura (2020) COVID-19 Pandemic: Potential Impact of Lockdown in Sub-Saharan Africa. *Journal of Community Medicine & Public Health*, 4 (3). p. 188. ISSN 2577-2228

Downloaded from: <https://e-space.mmu.ac.uk/626588/>

Version: Published Version

Publisher: Gavin Publishers

DOI: <https://doi.org/10.29011/2577-2228.100088>

Usage rights: Creative Commons: Attribution-Share Alike 4.0

Please cite the published version

<https://e-space.mmu.ac.uk>

COVID-19 Pandemic: Potential Impact of Lockdown in Sub-Saharan Africa

Mandu S Ekpenyong^{1*}, Nyashanu M², Alfred S Ekpenyong³, Opeyemi Odejimi⁴, Foluke S Bosun-Arije¹, Serrant L¹

¹Department of Nursing, Manchester Metropolitan University, United Kingdom

²Senior Lecturer in Health and Social Care/Public Health, Nottingham Trent University, United Kingdom

³Department of Sociology, Faculty of Social Sciences, Niger Delta University, Nigeria

⁴Birmingham and Solihull Mental Health NHS Foundation Trust, Birmingham, United Kingdom

***Corresponding author:** Mandu S Ekpenyong, Department of Nursing, Manchester Metropolitan University, M15 6Gx, United Kingdom

Citation: Ekpenyong MS, Nyashanu M, Ekpenyong AS, Odejimi O, Bosun-Arije FS, et al. (2020) COVID-19 Pandemic: Potential Impact of Lockdown in Sub-Saharan Africa. J Community Med Public Health 4: 188. DOI: 10.29011/2577-2228.100088

Received Date: July 06, 2020; **Accepted Date:** July 17, 2020; **Published Date:** July 24, 2020

Abstract

The COVID-19 lockdown approach in sub-Saharan Africa countries may not be as beneficial as intended due to the current employment, housing and health infrastructure challenges. Hence other infection prevention and control might need to be considered.

Keywords: COVID-19; Pandemic; Lockdown; Sub-Saharan Africa; Housing Health infrastructure; Employment; Infection prevention and control

Introduction

The COVID-19 virus (also known as coronavirus) was declared a pandemic viral outbreak by the World Health Organisation (WHO) following its rapid spread globally [1]. This resulted in many countries rolling out public health and economic response initiatives to curtail its spread and death tolls [2]. Many of the public health initiatives in individual countries were based on guidance from the WHO on infection prevention and control [3]. Further exploration of the use of varied strategies by individual countries can be attributed to their economic status. Of particular attention to public health, practitioners were the strategies used in countries affected by unemployment, urbanisation, poor housing, and weak health systems [3].

Sub-Saharan African countries are mostly classed as low and lower-middle-income countries [4]. They are affected by a myriad of public health issues which are social, economic, and political [5]. The public health issues come against a backdrop of several social and economic factors such as employment status, literacy levels, housing, health infrastructure, food and water sanitisation and many more. The advent of COVID-19 and the already fragile

health and economic systems in sub-Saharan African countries placed its population in a very vulnerable position and there is a chance that these countries might continue to suffer its impact long after the pandemic is over when compared to countries within other continents.

The continued increase of new cases and a number of deaths and with no cure or vaccine currently available made public health professionals advise countries to apply a total lockdown to slow the spread of the pandemic [6]. A lockdown is when all business in a country is halted to curb a pandemic except for essential services like hospitals and food shops [7]. The lockdown was introduced to reduce the spread of the virus and curb the consequence of the pandemic.

Many developed countries rolled out alleviation programmes to businesses and the most vulnerable populations before and during the lockdown [8]. For instance, business bail out strategies were rolled out in countries like the United States by injecting two trillion into the economy [9]. Likewise, in the United Kingdom, the government helped some business to pay 80% of the salaries of workers while on COVID-19 lockdown [10].

Some Sub-Saharan Africa countries also instituted lockdown [11]. The impact was greatly felt on its populace. Hence, this paper aims to discuss the potential impact of COVID-19 Lockdown

on employment, food security, housing conditions and health Infrastructure in Sub-Saharan Africa. It is believed that this paper provides some indication of the potential scale of COVID-19 pandemic and the lockdown approach in sub-Saharan Countries.

Implication on Employment, Housing and Health Infrastructure

High levels of unemployment in many Sub-Saharan countries have subsequently resulted in high self-employment with many individuals reliant on daily income [12,13]. For instance, self-employment accounts for at least 60% of all Zimbabwe's economic activity [13]. This implies that the lockdown order by the government in Sub-Saharan countries will certainly impair on the economic wellbeing of individuals.

Normally, many of the countries within sub-Saharan Africa have individuals who survive on less than one United States dollar per day [14]. Besides, the high unemployment and abject poverty means that individuals may struggle to have one decent meal a day following a reduction or loss of income [15]. It was estimated that COVID-19 pushed 40-60 million people to poverty in sub-Saharan Africa countries and this figure will increase as the lockdown continues [16]. This unprecedented fall into poverty may in turn affect people ability to comply with the lockdown rules imposed by the government.

Also, unlike many developed countries who had put in place economic strategies before and during the lockdown, many Sub-Saharan countries had not put in place economic strategies before declaring a lockdown. However, countries like Nigeria soon put in place strategies such as daily supplies of food to help households and prevent individuals from breaching lockdown rules. Nevertheless, this did not substitute daily income lost during the lockdown. Overall, this implies that the level of unemployment will continue to rise, and the economic impact of COVID-19 will linger much longer even after the world economy returns to the similitude of its previous state.

About 40% of Africa's population continent's population lives in urban areas [17]. This rapid urbanisation is worrisome and could be attributed to the substantial housing deficit in urban areas and expanding urban slum and many urban dwellers having no decent place to live or sleep [17]. For instance, it is estimated that about 71.8% of the urban population of sub-Saharan Africans live in the slums and this is the highest rate in the world [17,18].

The lockdown now means that people were staying more at home and this could gravely impact on individuals who have no house or decent apartments where they can be comfortably accommodated. This may consequently impact on the health and wellbeing of individuals, families, and communities. Having individuals occupying limited space for an unpredictable duration of time can lead to anger, frustrations, anxieties, depression,

and general deterioration on the mental health of society [18]. The contention for limited space and resources at home and the community could lead to social disharmony, quarrels, domestic violence, and injuries [18]. This may also impact on the ability of individuals to comply with lockdown rules in the search of a comfortable abode.

Initially, the number of reported cases and death in Sub-Saharan Africa did not rise as those reported in the developed world [19]. However, it soon became clear that if the cases rise like those reported in other developed countries, the current health system in many sub-Saharan countries will not be able to cope with the seriousness of COVID-19 infections. At the moment, many sub-Saharan countries health system is underfunded and poorly equipped [20]. For instance, there are only 55 intensive care units which serve 40 million people in Uganda [19]. Thus, having a spike in the number of cases may result in Sub-Saharan Africa recording the highest number of fatalities and this call for more public health measures.

Implications for Practice

Lockdown has helped reduce the spread and fatalities of COVID-19 in many countries. However, this measure might not be successful in sub-Saharan countries due to its current high unemployment, housing deficit, urbanisation and poor health infrastructures problems. This, therefore-calls for other infection prevention and control measures that prevents a national lockdown. For instance, a testing and contact tracing approach might be better suited for sub-Saharan Africa countries. This will mean individuals rather than the whole nation are isolated and quarantined if required. Although, fear, anxiety and stigma might prevent individuals from coming forward to be tested and provide details of those they have been in contact. This is the reason a bottom-up approach will be suggested, and key stakeholders are involved in the design and implementation of a testing and contact tracing strategy.

Limitations

The paper was written at the beginning of the COVID-19 pandemic lockdown in some sub-Saharan countries thus it is situation-specific. There is a chance that if it was written after the pandemic more social and economic factors might be impacted by the lockdown. Also, the paper is conceptual and a primary study might provide more details about the potential impact of the lockdown than what is currently being reported. However, the social and economic factors reported in this paper provide some indication of the potential scale of COVID-19 pandemic.

Conclusion

COVID-19 like other emergencies requires a measure of preparedness by sub-Saharan Africa countries to curtail its spread

and reduce fatalities. Considering that sub-African countries have faced infectious diseases such as Ebola and Lassa fever in the last decade. Hence, infection prevention and control procedures need to be put in place and continually reviewed. This infection prevention and control measures needs to take into cognisance the current challenges of employment, housing and healthcare of sub-Saharan African countries.

References

1. Jebri NMT (2020) World Health Organization declared a pandemic public health menace: A systematic review of the coronavirus disease 2019 "COVID-19". *International Journal of Psychosocial Rehabilitation* 24: 2784-2795.
2. World Health Organization (2020) Protocol for assessment of potential risk factors for 2019-novel coronavirus (COVID-19) infection among health care workers in a health care setting.
3. Huang C, Wang Y, Li X, Ren L, Zhao J, et al. (2020) Clinical features of patients infected with 2019 novel coronavirus in Wuhan, China. *Lancet* 395: 497-506.
4. World Bank Organisation (2020) World Bank Country and Lending Groups.
5. Lau H, Khosrawipour V, Kocbach P, Mikolajczyk A, Schubert J, et al. (2020) The positive impact of lockdown in Wuhan on containing the COVID-19 outbreak in China. *J Travel Med* 27.
6. Lippi F, Alvarez F, Argente D (2020) A Simple Planning Problem for COVID-19 Lockdown. *National Bureau of Economic Research*.
7. Lippi G, Henry BM, Bovo C, Sanchis-Gomar F (2020) Health risks and potential remedies during prolonged lockdowns for coronavirus disease 2019 (COVID-19). *Diagnosis* 7: 85-90.
8. Toda AA (2020) Susceptible-infected-recovered (SIR) dynamics of covid-19 and economic impact. *Cornell University*.
9. Centre for Disease Control and Prevention (2020) Preliminary estimates of the prevalence of selected underlying health conditions among patients with coronavirus disease 2019-United States, February 12-March 28, 2020. *Morbidity and Mortality Weekly Report*.
10. Nattrass N (2006) Trading off income and health?: AIDS and the disability grant in South Africa. *Journal of Social Policy* 35: 3-19.
11. Human Rights Watch (2020) Human Rights Dimensions of COVID-19 Response.
12. The Conversation (2020) Zimbabwe's shattered economy poses a serious challenge to fighting COVID-19.
13. Adediran AO, Oladejo SO, Ijagbemi CO (2020) The Fundamentals to Affordable Home-Ownership In Nigeria. *Journal of Multidisciplinary Engineering Science and Technology* 7: 11659-11665.
14. Asiedu E (2004) The determinants of employment of affiliates of US multinational enterprises in Africa. *Development Policy Review* 22: 371-379.
15. The World Economic Forum (2020) Workforce Principles for the COVID-19 Pandemic Stakeholder Capitalism in a Time of Crisis.
16. World Bank Blog (2020) The impact of COVID-19 (Coronavirus) on global poverty: Why Sub-Saharan Africa might be the region hardest hit.
17. United Nations Department Population Division (2018) Revision of World Urbanization Prospects.
18. Bonnefoy X (2007) Inadequate housing and health: an overview. *Int J Environment and Pollution* 30: 411-429.
19. Nuwagira E, Muzoora C (2020) Is Sub-Saharan Africa prepared for COVID-19? *Tropical Medicine and Health* 48: 1-3.
20. Ingram M, Sabo S, Rothers J, Wennerstrom A, de Zapien JG (2008) Community health workers and community advocacy: addressing health disparities. *J Community Health* 33: 417-424.